

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Principal Life Insurance Company Political Action Committee

ADDRESS (number and street)

711 High St.

Government Relations

☐Check if different
than previously
reported. (ACC)

Des Moines

IA

50392

0220

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00128918

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2010

through

03

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Terry Tobin

Signature of Treasurer

Electronically Filed by Terry Tobin

Date

04

09

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 36

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M M
0 3D D
0 1Y Y Y Y
2 0 1 0

To:

M M
0 3D D
3 1Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2010		63408.03
(b) Cash on Hand at Beginning of Reporting Period	68186.06	
(c) Total Receipts (from Line 19)	12422.17	37450.20
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	80608.23	100858.23
7. Total Disbursements (from Line 31)	49500.00	69750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31108.23	31108.23
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	3	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4008.07	6838.43
(ii) Unitemized	8414.10	30611.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12422.17	37450.20
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	12422.17	37450.20
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12422.17	37450.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12422.17	37450.20

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	49500.00	63500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	6250.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	49500.00	69750.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49500.00	69750.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	12422.17	37450.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12422.17	37450.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Michael Jon Beer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Mutual Funds & Broker Dealer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-824

Amount of Each Receipt this Period

35.00

B.

Full Name (Last, First, Middle Initial)

Louise A. Billmeyer

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP - Health IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-712

Amount of Each Receipt this Period

39.00

C.

Full Name (Last, First, Middle Initial)

Patti R. Blumer

Mailing Address 1350 I Street Northwest
Suite 880

City

Washington D.C.

State

DC

Zip Code

20005-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Director, Federal Gov Rel-DC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.40

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-925

Amount of Each Receipt this Period

48.40

SUBTOTAL of Receipts This Page (optional)

122.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Patti R. Blumer

Mailing Address 1350 I Street Northwest
Suite 880

City State Zip Code
Washington D.C. DC 20005-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
Director, Federal Gov Rel-DC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.40

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-926

Amount of Each Receipt this Period

48.40

B.

Full Name (Last, First, Middle Initial)

Christopher Joseph Bowman

Mailing Address 711 High Street

City State Zip Code
Des Moines IA 50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP-Corp Strategic Dev & Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-157

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Christopher Joseph Bowman

Mailing Address 711 High Street

City State Zip Code
Des Moines IA 50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP-Corp Strategic Dev & Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-158

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

148.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Paul Alvin Brown

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Institutional Mkt Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-928

Amount of Each Receipt this Period

39.00

B.

Full Name (Last, First, Middle Initial)

Ned Alan Burmeister

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

SVP & COO - PI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-895

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Ned Alan Burmeister

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

SVP & COO - PI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-896

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

139.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gregory John Burrows

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-387

Amount of Each Receipt this Period

63.45

B.

Full Name (Last, First, Middle Initial)

Gregory John Burrows

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-388

Amount of Each Receipt this Period

63.45

C.

Full Name (Last, First, Middle Initial)

Nicholas M. Cecere

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Individual Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-898

Amount of Each Receipt this Period

38.46

SUBTOTAL of Receipts This Page (optional)

165.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Barrie Gibb Christman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Individual Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.82

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-64

Amount of Each Receipt this Period

38.47

B.

Full Name (Last, First, Middle Initial)

Ronald L. Danilson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-1037

Amount of Each Receipt this Period

65.00

C.

Full Name (Last, First, Middle Initial)

Ronald L. Danilson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-1038

Amount of Each Receipt this Period

65.00

SUBTOTAL of Receipts This Page (optional)

168.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Timothy Mark Dunbar

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec Dir - Equities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-1207

Amount of Each Receipt this Period

63.46

B.

Full Name (Last, First, Middle Initial)

Timothy Mark Dunbar

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Exec Dir - Equities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-1208

Amount of Each Receipt this Period

63.46

C.

Full Name (Last, First, Middle Initial)

Gregory Bernard Elming

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-389

Amount of Each Receipt this Period

64.00

SUBTOTAL of Receipts This Page (optional)

190.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gregory Bernard Elming

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-390

Amount of Each Receipt this Period

64.00

B.

Full Name (Last, First, Middle Initial)

Nora Mary Everett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-903

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)

Nora Mary Everett

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement & Investor Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-904

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

154.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Douglas Alan Fick

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP - SBD IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-324

Amount of Each Receipt this Period

38.00

B.

Full Name (Last, First, Middle Initial)

Thomas John Graf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-1193

Amount of Each Receipt this Period

165.00

C.

Full Name (Last, First, Middle Initial)

Thomas John Graf

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-1194

Amount of Each Receipt this Period

165.00

SUBTOTAL of Receipts This Page (optional)

368.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Lynn Marie Graves

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-718

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Victoria Whitaker Gray

Mailing Address 51 Germantown Court Suite 101
Principal Financial Group

City

Cordova

State

TN

Zip Code

38018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-1239

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

Victoria Whitaker Gray

Mailing Address 51 Germantown Court Suite 101
Principal Financial Group

City

Cordova

State

TN

Zip Code

38018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Sr Account Exec-Retirement Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-1240

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mark A. Hanrahan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Mng Dir-CRE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	0

Transaction ID: 20100406154154-737

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mark A. Hanrahan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Mng Dir-CRE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID: 20100406154154-738

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Loraine N. Hardin

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP- Chief Admin Officer Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID: 20100406154154-698

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Joyce N. Hoffman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-553

Amount of Each Receipt this Period

63.46

B.

Full Name (Last, First, Middle Initial)

Joyce N. Hoffman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Corporate Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-554

Amount of Each Receipt this Period

63.46

C.

Full Name (Last, First, Middle Initial)

Daniel Joseph Houston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

President - Ret, Ins & Fin Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-207

Amount of Each Receipt this Period

117.00

SUBTOTAL of Receipts This Page (optional)

243.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Daniel Joseph Houston

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

President - Ret, Ins & Fin Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-208

Amount of Each Receipt this Period

117.00

B.

Full Name (Last, First, Middle Initial)

Monica Jean Kirgan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-National Service Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-880

Amount of Each Receipt this Period

36.00

C.

Full Name (Last, First, Middle Initial)

Ellen Ruth Lamale

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-351

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

223.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ellen Ruth Lamale

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-352

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Julia M. Lawler-Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Inv Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-559

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Julia M. Lawler-Johnson

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Svp & Chief Inv Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-560

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Richard C. Lawson

Mailing Address 1350 I Street Northwest
Suite 880

City State Zip Code
Washington D.C. DC 20005-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-1004

Amount of Each Receipt this Period

38.46

B.

Full Name (Last, First, Middle Initial)

Terrance Joseph Lillis

Mailing Address 711 High Street

City State Zip Code
Des Moines IA 50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
SVP & Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-1176

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Daniel John McGee

Mailing Address 13860 Ballantyne Corp Place, Suite
Principal Financial Group

City State Zip Code
Charlotte NC 28277-2467

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP-Managing Dir, RIS Distrib

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-212

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

118.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Amy Joan Mills

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-16

Amount of Each Receipt this Period

38.46

B.

Full Name (Last, First, Middle Initial)

Timothy Jon Minard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-1213

Amount of Each Receipt this Period

65.00

C.

Full Name (Last, First, Middle Initial)

Timothy Jon Minard

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Retirement Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-1214

Amount of Each Receipt this Period

65.00

SUBTOTAL of Receipts This Page (optional)

168.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mary Agnes O'Keefe

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.38

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-787

Amount of Each Receipt this Period

44.23

B.

Full Name (Last, First, Middle Initial)

Mary Agnes O'Keefe

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.38

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-788

Amount of Each Receipt this Period

44.23

C.

Full Name (Last, First, Middle Initial)

R. Lucia Riddle

Mailing Address 1350 I Street Northwest
Suite 880

City

Washington D.C.

State

DC

Zip Code

20005-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-963

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

138.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

R. Lucia Riddle

Mailing Address 1350 I Street Northwest
Suite 880

City State Zip Code
Washington D.C. DC 20005-7207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP-Federal Govt Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-964

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

John Dennis Schmidt

Mailing Address 711 High Street

City State Zip Code
Des Moines IA 50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-518

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Gary Paul Scholten

Mailing Address 711 High Street

City State Zip Code
Des Moines IA 50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
SVP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-371

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gary Paul Scholten

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
SVP & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-372

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

Karen Elizabeth Shaff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
Exec VP & General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-587

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)

Karen Elizabeth Shaff

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation
Exec VP & General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-588

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

265.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Norman R. Sorensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

President Int'l Asset Accum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-905

Amount of Each Receipt this Period

76.92

B.

Full Name (Last, First, Middle Initial)

Norman R. Sorensen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal International,
Inc.

Occupation

President Int'l Asset Accum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.52

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-906

Amount of Each Receipt this Period

76.92

C.

Full Name (Last, First, Middle Initial)

Deanna Dawnette Strable-Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Ind Life & Spec Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-251

Amount of Each Receipt this Period

63.46

SUBTOTAL of Receipts This Page (optional)

217.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Deanna Dawnette Strable-Soethout

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

SVP Ind Life & Spec Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.76

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-252

Amount of Each Receipt this Period

63.46

B.

Full Name (Last, First, Middle Initial)

Luke Joseph Vandermillen

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

VP RIS Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 1 0

Transaction ID: 20100406154154-716

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)

Larry Donald Zimpleman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chairman, President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.38

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 1 0

Transaction ID: 20100406154154-653

Amount of Each Receipt this Period

169.23

SUBTOTAL of Receipts This Page (optional)

267.69

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 36

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Larry Donald Zimpleman

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing
federal political committee.

C

Name of Employer
Principal Life Ins Co.

Occupation

Chairman, President & CEO

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1015.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Transaction ID: 20100406154154-654

Amount of Each Receipt this Period

169.23

SUBTOTAL of Receipts This Page (optional)

169.23

TOTAL This Period (last page this line number only)

4008.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Americas Health Insurance Plans Pac (AHIP PAC)

Mailing Address 601 Pennsylvania Avenue NW
Suite 500 South Building

City Washington State DC Zip Code 20004

Purpose of Disbursement
2010 ContributionCandidate Name
Americas Health Insurance Plans Pac (AHIP PAC)Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

Transaction ID: 6EBC08DAE967D953783

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Andre Carson for Congress

Mailing Address PO Box 1863

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement
2010 PrimaryCandidate Name
Andre CarsonOffice Sought: ☒ House
☐ Senate
☐ President

State: IN District: 07

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 8B1D8492D873B8A93E5

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Boswell for Congress

Mailing Address PO Box 6220

City Des Moines State IA Zip Code 50309

Purpose of Disbursement
2010 PrimaryCandidate Name
Leonard L. BoswellOffice Sought: ☒ House
☐ Senate
☐ President

State: IA District: 03

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D766940B73EF37E7C78

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Castle Campaign Fund	Transaction ID: 6D163A9051A541248BD Date of Disbursement																				
Mailing Address PO Box 133	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Wilmington State DE Zip Code 19899	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Michael N. Castle Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District:	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Category/Type 011																					
B. Full Name (Last, First, Middle Initial) Committee To Re-Elect Nydia M. Velazquez To Congress	Transaction ID: 96128F83D0F1E406A28 Date of Disbursement																				
Mailing Address 315 Inspiration Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	1	0												
City Gaithersburg State MD Zip Code 20878	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Nydia M. Velazquez Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 12	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Category/Type 011																					
C. Full Name (Last, First, Middle Initial) Congressional Black Caucus Pac	Transaction ID: 1C3D2D16ABD5FC97E7B Date of Disbursement																				
Mailing Address 227 Massachusetts Ave., NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Contribution Candidate Name Congressional Black Caucus Pac Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Category/Type 011																					
SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td colspan="10">7000.00</td> </tr> </table>	7000.00																			
7000.00																					
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td colspan="10"></td> </tr> </table>																				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 36

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 South Capitol Street, SE 2nd Floor</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement 2010 Contribution</p> <p>Candidate Name Democratic Congressional Campaign Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: 7CDFA53620D3B2CC603</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress</p> <p>Mailing Address Post Office Box 9336</p> <p>City Fargo State ND Zip Code 58106</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Earl Pomeroy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: 99F2D9C5EF478B59834</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Financial Services Roundtable Pac</p> <p>Mailing Address 1001 Pennsylvania Avenue, NW Suite 500 South</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement 2010 Contribution</p> <p>Candidate Name Financial Services Roundtable Pac</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: 4C4C87DAEFB61B76CDD</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p>	<p>7000.00</p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Friends for Gregory Meeks	Transaction ID: 2AF1627132B35CC6F13 Date of Disbursement																				
Mailing Address 153-01 Jamaica Ave. Suite 535	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City State Zip Code Jamaica NY 11432	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Gregory W. Meeks	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
B. Full Name (Last, First, Middle Initial) Friends of Jim Clyburn	Transaction ID: 5ECC75F783F5FB08D65 Date of Disbursement																				
Mailing Address PO Box 12567	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	1	0												
City State Zip Code Columbia SC 29211	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name James E. Clyburn	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				
C. Full Name (Last, First, Middle Initial) Friends of John Boehner	Transaction ID: D4AB668BAA2849D8F38 Date of Disbursement																				
Mailing Address 7908 Cincinnati Dayton Road Suite I	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City State Zip Code West Chester OH 45069	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name John A. Boehner	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Friends of Mark Warner

Mailing Address 201 North Union Street Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2014 PrimaryCandidate Name
Mark R. Warner011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District:

Transaction ID: 9B777CF455A65BD1D33

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Glacier Pac

Mailing Address 3242 Cummins Way
Suite 603

City Missoula State MT Zip Code 59802

Purpose of Disbursement
2010 ContributionCandidate Name
Glacier Pac011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: 215227290A0461F164D

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Investment Company Institute Political Action Committee
(ICI PAC)

Mailing Address 1401 H Street NW Suite 1200

City Washington State DC Zip Code 20005

Purpose of Disbursement
2010 ContributionCandidate Name
Investment Company Institute Political Action Comm-
ittee (ICI PAC)011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: 6A7938CE0B6E16F52CA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	1	0

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional) ►

6500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Jim Himes for Congress	Transaction ID: 76C54ECE4D4BEBEF660 Date of Disbursement																				
Mailing Address 857 Post Road, #312	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Fairfield State CT Zip Code 06824	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name James A. Himes	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Kind for Congress Committee	Transaction ID: 1FEEFC7BC8D0156AB0E Date of Disbursement																				
Mailing Address 205 5th Avenue South Suite 428	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City La Crosse State WI Zip Code 54601	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Ron Kind	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) King for Congress	Transaction ID: A87AEAEC5B9F57E873 Date of Disbursement																				
Mailing Address 116 N Main St. PO Box 400	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Early State IA Zip Code 50535	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Steve King	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Larson for Congress	Transaction ID: 4489DB3DDDD4CF7CE19C Date of Disbursement																				
Mailing Address 29 Ruff Circle	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Glastonbury State CT Zip Code 06033	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name John B. Larson	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Latham for Congress	Transaction ID: 5584AA125235E494F6D Date of Disbursement																				
Mailing Address PO Box 71 PO Box 71	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Clarion State IA Zip Code 50525	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Tom Latham	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Lee Terry for Congress	Transaction ID: 16B66B75CCA2B0E3B2E Date of Disbursement																				
Mailing Address PO Box 540098	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Omaha State NE Zip Code 68154	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Lee Terry	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Loeb sack for Congress	Transaction ID: 93C21B0D244DF240D0C Date of Disbursement																				
Mailing Address PO Box 1457	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	1	0												
City Iowa City State IA Zip Code 52244	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name David Loeb sack Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 02	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Category/Type 011																					
B. Full Name (Last, First, Middle Initial) Melissa Bean for Congress	Transaction ID: CEECD2921B9FA9ACB5A Date of Disbursement																				
Mailing Address PO Box 3068	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
City Barrington State IL Zip Code 60010	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 General Candidate Name Melissa Luburich Bean Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Category/Type 011																					
C. Full Name (Last, First, Middle Initial) Minnick for Congress	Transaction ID: 6C7F109D5883F38A218 Date of Disbursement																				
Mailing Address PO Box 288	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	4		2	0	1	0												
City Meridian State ID Zip Code 83642	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2010 Primary Candidate Name Walter C. Minnick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District: 01	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Category/Type 011																					

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 / 36

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
New Democrat Coalition Political Action Committee Aka
Ndc Pac

Mailing Address 607 14th Street NW Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
2010 ContributionCandidate Name
New Democrat Coalition Political Action Committee
Aka Ndc PacOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: 4F9E2587CBE238D16E8

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Pennsylvanians for Kanjorski

Mailing Address 103 South Hanover Street

City Nanticoke State PA Zip Code 18634

Purpose of Disbursement
2010 PrimaryCandidate Name
Paul E. KanjorskiOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 11

Transaction ID: 1891F274CAEFCA30308

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Republican Mainstreet Partnership PacMailing Address C/O G & W 2201 Wisconsin Ave. NW
Suite 320

City Washington State DC Zip Code 20007

Purpose of Disbursement
2010 ContributionCandidate Name
Republican Mainstreet Partnership PacOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Transaction ID: E87F3746D5D062D78C9

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	0

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

49500.00